

Debra Vanderbeek
(Print Name of lobbyist)

PLEASE PRINT

### STATE OF NEW HAMPSHIRE

### 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

### RECEIVED

OCT 3 1 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

1. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Leann Moccia, Chris Herr II. Name of lobbyist's partnership, firm or corporation, if any: Legislative Solutions, L.L.C. (Name of partnership, firm or corporation) P.O. Box 10724 Bedford 03110 (Town/City) **Business Address:** e-mail dbeek@aol.com 603-986-9145 III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: **New Hampshire Camp Directors Association** (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. April 25, 2018 🔲 July 25, 2018 🔲 IV. Date of Report activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 Reports cover: October 31, 2018 January 30, 2019 🗌 activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: X If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA-15, RSA-15-B, RSA-14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. October 18, 2018 (Date) (Signature of lobbyist)

# P L E A S E P R I N T

# STATE OF NEW HAMPSHIRE



# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client New Hampshire Camp Directors Association	Date October 18, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	nt relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 1500.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 3000.00 year)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>4500.00</u>
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office of individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with vaceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made to may be filed for the lobbyist(s)/firm the aggregate total of all expenses parexpenses; (b) the aggregate total of about the meals purchased during a busine test than \$10 that is given to the personal with a value of \$25.00 or less); are corting period of greater than \$25.00 follow of greater than \$25, purchase of ter than \$25, but not greater than \$5s, expense reimbursement, or politic
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 1500.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>1500.00</u>
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>3000.00</u>
f) Total of all expenses year to date	f) \$ <u>4500.00</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged.	obbying fees during this repo
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
	· <b></b>
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the foregoing infor
is true and complete to the best of my knowledge and belief.	
	October 18, 2018
(Signature of lobbyist)	October 18, 2018 (Date)

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbyi	ng partnership, firm, or corpo	ration: Legislative Solution	s, L.L.C.
Name of Client (	leave blank if Statement is fo	r the partnership, firm, or o	corporation and not related to any
particular client)	lar client): New Hampshire Camp Directors Association		
Date of Report (	check one):		
April 25, 2018	□ July 25, 2018 □	October 31, 2018 🔼	January 30, 2019 🗆
I have read RSA the following A submitted):  Addended Addended Addended	ddendums submitted with thaum A(s).  um B(s).	e Statement of Income an it Statement (insert the nu	d Expenses described above, and imber of Addendum forms being
	pest of my knowledge and bel	ief.	et and each Addendum is true and over 18, 2018  (Date)
(Print Name of I	obbyist)	<del></del>	

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying par	tnership, firm, or corpo	ration: Legislative Solutio	ns, L.L.C.
Name of Client (leave	blank if Statement is fo	r the partnership, firm, or	corporation and not related to any
particular client):	New Hampshire Camp Directors Association		
Date of Report (check	•		
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018 🕅	January 30, 2019 □
the following Addend submitted):	ums submitted with the		nd Expenses described above, and umber of Addendum forms being
Addendum A(	s).		
Addendum B(s	s).		
Addendum C(	s).		
	rm that the foregoing in my knowledge and bel	ief.	nt and each Addendum is true and ber 18, 2018
(Signature of Jobbyist)			(Date)
Periklis Karoutas		<del>.</del>	
(Print Name of lobbyis	st)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying parts	nership, firm, or corpo	ration: Legislative Solution	ns, L.L.C.
Name of Client (leave b	lank if Statement is fo	r the partnership, firm, or	corporation and not related to any
particular client):	New Hampshire Camp Directors Association		
Date of Report (check o	ne):		
April 25, 2018 □	July 25, 2018 □	October 31, 2018 🗖	January 30, 2019 □
I have read RSA 15, RS the following Addendusubmitted):	SA 15-B, RSA 664, th ms submitted with the	ne Statement of Income and Statement (insert the nu	nd Expenses described above, and umber of Addendum forms being
Addendum A(s)	).		
Addendum B(s)	·		
Addendum C(s)	i.		
I hereby swear or affirm complete to the best of the b		ief.	nt and each Addendum is true and ber 18, 2018 (Date)
Leann Moccia			
(Print Name of lobbyist	 )		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partnership, fin	rm, or corpora	ntion: Legislative Solution	ns, L.L.C.
			corporation and not related to any
particular client):	New Hampshire Camp Directors Association		
Date of Report (check one):			
April 25, 2018 □ July 25,	2018 🗆	October 31, 2018 💢	January 30, 2019 □
I have read RSA 15, RSA 15-B, the following Addendums submitted):  Addendum A(s).  Addendum B(s).  Addendum C(s).	RSA 664, the tted with that	Statement of Income an Statement (insert the n	nd Expenses described above, and umber of Addendum forms being
I hereby swear or affirm that the complete to the best of my knowled (Signature of lobbyist)  Christopher Herr  (Print Name of lobbyist)		ef.	nt and each Addendum is true and ber 18, 2018 (Date)